

Albert Garrett President

MICHIGAN AFSCATE COUNCIL 25

American Federation of State, County and Municipal Employees, AFL-CIO

Detroit Office

600 W. Lafayette Suite 500 • Detroit, MI 48226 • Phone: (313) 964-1711 FAX: (313) 964-0230 • Lansing Headquarters - 1-800-AFSCME25 • www.miafscme.org

Lawrence A. Roehrig Secretary-Treasurer

EXECUTIVE BOARD

Lakay Avant Region 6 Jim Bale Region 5

Mel Brabson Region 1

David Brandt Region 9

Donna Cangemi Region 3

Loretta Coleman Region 3

Lorna Davison

Robert Donald

Nora Grambau Region 6

Gloria Harsten Region 3

Karen Henning

Region 3

Diane Holden

Region 3 Keith January

Arlean King

Paul Long Region 6

Denis Martin Region 2 Rod McCrary

Region 8

J. Phil McGuire

Region 2 Sam Muma

Region 6

Doug Murch
Region 5

Gloria Peterson Region 4

Eugene Purry Region 1

Jack Roach

Dan Salo
Region 11

Cindy Spurlock Region 2

William Tharp Region 10 Elmer Trombley

Region 2

Alan Troy

Region 4

Dallas West Region 3

Scott Whitman Region 7 Russell Williams

Region 11 Leamon Wilson Region 1

> Sam Zettner Region 3

THANK YOU MR. CHAIRMAN.

MEMBERS OF THE COMMITTEE:

MY NAME IS NICK CIARAMITARO AND I AM DIRECTOR OF LEGISLATION AND PUBLIC POLICY FOR THE MICHIGAN COUNCIL OF THE AMERICAN FEDERATION OF STATE, COUNTY AND MUNICIPAL EMPLOYEES.

MICHIGAN AFSCME STRONGLY OPPOSES THE PACKAGE OF BILLS BEFORE YOU BECAUSE THEY WOULD SEND A MESSAGE THAT THE STATE OF MICHIGAN DOES NOT VALUE THE HARD WORK AND EFFORT OF DIRECT CARE WORKERS ENOUGH TO RECOGNIZE THEIR RIGHT OF SELF DETERMINATION AND WOULD HAVE THE EFFECT OF REWARDING EMPLOYERS WHO VIOLATE MICHIGAN AND NATIONAL LABOR LAWS. THESE BILLS WOULD DO NOTHING TO IMPROVE THE SUPPORTS AND SERVICES AVAILABLE TO PEOPLE WITH DEVELOPMENTAL DISABILITES, THOSE SUFFERING FROM MENTAL ILLNESS AND OLDER CITIZENS WHO NEED THE HELP OF DIRECT CARE WORKERS. IT SHOWS A LEVEL OF DISDAIN FOR THOSE PROVIDING CARE TO OUR PARENTS, GRANDPARENTS AND DISABLED CHILDREN AT A TIME WHEN WE MOST NEED TO ATTRACT AND RETAIN MORE WORKERS TO THE FIELD AS THE BOOMER GENERATION - MY GENERATION - BEGINS TO TURN SIXTY AND SHOWS GREAT PROMISE OF LIVING MANY YEARS.

THE NEED TO ATTRACT AND RETAIN QUALITY HEALTH CARE WORKERS WAS A KEY FINDING IN THE REPORT OF THE LONG TERM CARE TASK FORCE. INDEED, PROVIDERS, ADVOCATES AND WORKERS, AS WELL AS MEMBER FROM BOTH SIDES OF THE ISLE AGREED THAT QUALITY WORKERS ARE CRITICAL TO QUALITY SERVICE.



A RECENT MICHIGAN STATE UNIVERSITY STUDY (VIEWS FROM THE FRONT) SHOWS THAT MICHIGAN WILL NEED TO MORE THAN DOUBLE THE NUMBER OF DIRECT CARE WORKERS IN THE NEXT DECADE BUT IS UNABLE TO ATTRACT AND RETAIN SUFFICIENT WORKERS, NOT ONLY AS A RESULT OF LOW WAGES AND BENEFITS, BUT ALSO AS A RESULT OF A SENSE THAT THE IMPORTANT AND DIFFICULT WORK THEY DO IS NOT APPRECIATED BY OUR SOCIETY. EVERY DAY DIRECT CARE WORKERS ARE FORCED TO LEAVE THE JOBS THEY LOVE. WHAT DOES IT SAY ABOUT OUR VALUES WHEN DIRECT CARE WORKERS ARE TREATED WITH LESS RESPECT THAN FAST FOOD WORKERS – AND I MEAN NO DISRESPECT TO FAST FOOD WORKERS?

THE STANDARD ANSWER IS THAT WE WANT TO RECOGNIZE THEIR EFFORTS WITH BETTER PAY AND BETTER BENEFITS BUT WE JUST CAN'T AFFORD IT. WE CAN'T AFFORD TO TAKE CARE OF OUR PARENTS, GRANDPARENTS AND DISABLED CHILDREN?

THE TRUTH IS WE HAVE A MORAL OBLIGATION TO TAKE CARE OF THEM. BUT THE SAD TRUTH IS THAT THE INDUSTRY FORCES DIRECT CARE WORKERS INTO SOCIAL WELFARE PROGRAMS BY SANCTIONING LOW WAGES AND BENEFITS. FULLY FIFTY PERCENT OF DIRECT CARE WORKERS IN THIS STATE - PEOPLE WHO WORK FORTY TO SIXTY HOURS A WEEK FOR TWO AND THREE EMPLOYERS DOING PHYSICALLY AND EMOTIONALLY DRAINING WORK - ARE FORCED TO RESORT TO FOOD STAMPS AND APPLY FOR MEDICAID TO MEET THEIR OWN HEALTH CARE NEEDS AND THE NEEDS OF THEIR FAMILIES. IS IT ANY WONDER THAT THE INDUSTRY WIDE TURNOVER RATE IS MORE THAN SIXTY PERCENT A YEAR AND IN SOME CASES RISES AS HIGH AS 100 TO 300 PERCENT. NOT ONLY DOES A TURNOVER RATE OF THAT MAGNITUDE DECREASE THE AVAILABILITY OF QUAILITY WORKERS BUT IT DEMORALIZES CONSUMERS AND WASTES TAX DOLLARS ON TRAINING REPLACEMENT WORKERS.

BY PROHIBITING ANY "DISCRIMINATION" AGAINST A PROVIDER OR LICENSEE ON THE BASIS OF THE EXISTENCE OR LACK OF EXISTENCE OF A COLLECTIVE BARGAINING AGREEMENT, THE BILLS ATTEMPT TO PREVENT THE USE OF THE EXISTENCE OF SUCH AN AGREEMENT AS EVIDENCE OF COMPLIANCE WITH OTHER RULES – A LONG STANDING PRECEDENT IN A OTHER AREAS OF THE LAW. BUT MORE IMPORTANTLY THEY WOULD PREVENT THE DEPARTMENTS OF COMMUNITY HEALTH AND HUMAN SERVICSE FROM USING THEIR RULE MAKING AUTHORITY TO ENFORCE LONG ESTABLISHED NATIONAL AND MICHIGAN LABOR LAWS. NO MATTER HOW MANY UNFAIR LABOR PRACTICE ALLEGATIONS, NO MATTER HOW MANY UNFAIR LABOR PRACTICE DETERMINATIONS, NO MATTER IF THE EMPLOYER REFUSES TO RECOGNIZE A DEMOCRATICALLY ELECTED UNION OR REFUSES TO BARGAIN IN GOOD FAITH, NO MATTER IF

EMPLOYEES ARE FIRED FOR UNION ACTIVITY, THE BILL SUGGESTS THAT THE STATE MUST LICENSE AND EVEN CONTRACT USING TAXPAYERS' MONEY WITH THAT PROVIDER FOR SERVICES.

IF YOU THINK I AM EXAGGERATING, NOTE THAT A NUMBER OF ENTITIES LICENSED BY THE STATE AND ENJOYING THE SUPPORT OF TAXPAYER FUNDED CONTRACTS HAVE JUST SUCH A TRACT RECORD. OVER 27 PROVIDERS WERE FOUND IN ONE CASE ALONE TO HAVE VIOLATED THE LAW BY FAILING TO NEGOTIATE IN GOOD FAITH BY NO LESS THAN THE SUPREME COURT AND YET NONE OF THOSE 27 PROVIDERS HAS YET TO CONCLUDE A CONTRACT.

TO BE SURE THERE ARE MANY GOOD PROVIDERS STRUGGLING TO PROVIDE SERVICES ON SCARCE RESOURCES. BUT REFORMS ARE NEEDED NOT FOR THOSE WHO DO THE RIGHT THING BUT FOR THOSE WHO DO NOT.

ONE OF THE WORST RECORDS ON FILE WITH THE STATE SHOWS A NON-PROFIT PROVIDER – AND I WON'T NAME THE COMPANY PUBLICLY BECAUSE I DON'T KNOW IF THEY ARE HERE TO RESPOND – THAT RAN 22 HOMES IN 2004 AND PAID ITS PRESIDENT NEARLY \$265,000. BUT IN ADDITION TO 3 UNFAIR LABOR CHARGES IT ALSO RACKED UP 70 HEALTH AND SAFETY VIOLATIONS. AND UNLESS YOU THINK THIS IS AN ISOLATED CASE, I HAVE ATTACHED THREE PAGES OF VIOLATIONS WHICH OUR INTERNATIONAL STAFF COMPILED IN JUST A FEW DAYS.

CLEARLY REFORM OF THIS SYSTEM IS NECESSARY.

THESE BILLS WOULD RESTRICT THE EXECUTIVE BRANCH FROM CONSIDERING ONE OPTION TO DEALING WITH THE PROBLEM. THEY ARE PREMATURE AT BEST AND ANTI-WORKER AT WORST. THE FLURRY OF ACTIVITY BY THE INDUSTRY IS BASED ON A CONCERN FOR RULES THAT HAVE NOT EVEN BEEN PROMULGATED BY ANY DEPARTMENT OF STATE GOVERNMENT.

A DOZEN ADVOCACY GROUPS – NOT LABOR GROUPS BUT GROUPS THAT ADVOCATE FOR CONSUMERS – ASKED GOVERNOR GRANHOLM AND THE DEPARTMENTS TO LOOK INTO THE SERIOUS PROBLEMS IN THIS INDUSTRY. WE HAVE MADE SUGGESTIONS BUT NO REFORMS HAVE BEEN FINALIZED OR PROMULGATED. INDEED, BEFORE ANY RULES COULD GO INTO EFFECT THEY WOULD HAVE TO BE FIRST CLEARED BY THE STATE OFFICE OF ADMINISTRATIVE HEARINGS AND RULES AND THE LEGISLATIVE SERVICE BUREAU. AFTER A MINNIMUM 28 DAY NOTICE PERIOD THE DEPARTMENTS WOULD BE REQUIRED TO HOLD AT LEAST ONE PUBLIC HEARING. THE DEPARTMENTS WOULD THEN BE REQUIRED TO EITHER ADOPT OR EXPLAIN THEIR DISAGREEMENT WITH ANY SUGGESTIONS MADE AT PUBLIC HEARING. THEN THOSE RULES WOULD BE SUBMITTED TO THE LEGISLATURE BEFORE THEY GO INTO EFFECT.

BY THE WAY, OUR SUGGESTIONS DO NOT MANDATE COLLECTIVE BARGAINING NOR DO THEY REQUIRE ANY ONE TO JOIN A UNION. THEY DO DEMAND ACTION TO ATTRACT AND RETAIN DIRECT CARE WORKERS SO CRITICAL TO THE HEALTH AND WELL BEING OF MICHIGAN'S CITIZENS. AND WE DO THINK THAT THE EXISTENCE OF A COLLECTIVE BARGAINING AGREEMENT SHOULD BE EVIDENCE OF SUCH AN EFFORT BUT IT IS BY NO MEANS A REQUIREMENT. NOR WOULD WE BE INTERESTED IN FORCING UNIONAZATION ON ANY ONE. IT IS A KEY TENET OF THE LABOR MOVEMENT THAT WORKERS – NOT UNIONS AND CERTAINLY NOT THEIR EMPLOYERS – DETERMINE WHEN AND WHICH UNION TO JOIN OR TO REMAIN UNREPRESENTED.

IN SUMMARY, WE WOULD HOPE THAT THE MEMBERS OF THIS COMMITTEE WOULD WORK WITH US TO FIND SOLUTIONS TO THE SERIOUS DIRECT CARE CRISIS FACING OUR STATE RATHER THAN MOVING LEGISLATION DESIGNED TO ELIMINATE CONSIDERATION OF ONE OPTION. WE ARE ANXIOUS TO WORK WITH YOU, WITH THE ADVOCACY COMMUNITY AND WITH THE PROVIDER COMMUNITY TOWARD THAT END. BUT IN OUR VIEW, IGNORING THE PROBLEM IS NOT AN OPTION.

tld:547iuoe/aflcio/

# esua	liconcoo Mamo			
2000	Ficensee Name	Address	Violation	Desciption
				Resident was given another resident's medication by mistake and
AL1110237484	Alvin G. Ferdinand Inc.	4074 Lake Street, Bridgman, MI 49106	R 400.15312	had to be taken to ER for treatment
AL110095313	Alvin G. Ferdinand Inc.	11880 Gast Road, Bridgman 49106	R 400.15403	Strong odor of urine throughout the facility
AL190248000	Caring Hands Loving Hearts LLC	311 Higham, St. Johns, 48879	R 400.15403	Cat litter box in room 4 had a strong urine odor
200	:			Open food at the medication station, candles burning everywhere, strong urine odor, sttckydirty floors; sharp, dirty knife was flound next to an orange littee container on the
AL 190248000	Caring Hands Loving Hearts LLC	311 Higham, St. Johns, 48879	R 400.15403	dining room table
AL190248000	Caring Hands Loving Hearts LLC	311 Higham, St. Johns, 48879	R 400.15311	Licensee failed to submit an incident report when resident demonstrated violent behavior and was hospitalized
AL 190248000	Caring Hands Loving Hearts LLC	311 Higham, St. Johns, 48879	R 400.15311	Incident reports not completed for runaway and violent outburst
AL 190248000	Caring Hands Loving Hearts LLC	311 Higham, St. Johns, 48879	R 400.15313	Minimum of three nutritional meals are not provided daily
AL190248000	Caring Hands Loving Hearts LLC	311 Higham, St. Johns, 48879	R 400.15403	No toilet paper in main bathroom and no toilet paper in the storage room
AL 190248000	Caring Hands Loving Hearls LLC 311 Higham, St. Johns, 48879		R 400,15403	Showerhead was broken in the main bathroom used by the residents, residents could not shower for several days
AL 190248000	Caring Hands Loving Hearts LLC 311 Higham, St. Johns, 48879		R 400, 15404	Inadequate provision for the laundering of residents' laundry no laundry soap for 2 weeks, etc.